

Texas Department of Insurance

State Fire Marshal's Office Mail Code 112-FM

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INSTALLING COMPANY	
Address:	
City:	Zip
Phone:	
Company Certificate of Registration Number	

Fire Extinguisher System Installation Certification	Company Certificate of Registration Number
PROTECTED PROPERTY Name: Street Address: City: City: Owner or Owner's representative instructed on system operation & maintenance: Yes No Owners Rep, if applicable:	SYSTEM INFORMATION System Manufacturer's Name: Installation Manual: UL Number: Date: Design type: Pre-engineered: Engineered: If Pre-engineered, Model Number Coverage Type: Total Flooding: Local App:
LOCAL AUTHORITY HAVING JURISDICTION Name: Street Address: City: HAZARD ANALYSIS Name of area, room, building or hazard protected	System Actuation: Automatic: Manual: Air/Fan shutdown on actuation?Yes: No: Design discharge rate or concentration level: Design discharge time: Seconds: AGENT INFORMATION Type of agent provided: Oty Storage outlinder. Manufacturer Part No. Amount of agent.
Primary Class of Protected Hazard Class A - Wood, paper, etc. Class B - Flammable liquids Class C - Electrical equipment Class C - Electrical equipment	Qty Storage cylinder Manufacturer Part No. Amount of agent EQUIPMENT INFORMATION Initiating Devices Qty Item Manufacturer Part No. Temperature
Kitchen Hoods & Appliance System Height Length Width Overall Hood ft x ft x ft Plenum ft x ft x ft Exhaust duct perimeter in Appliances Gas or Oty Protected Float Length Width Height Length Width Other Type Hazards Is hazard normally occupied? Yes No N/A Size of Hazard Total Volume cuft or Total Area sqft	Fusible Links Sprinkler Heads Heat Detectors Smoke Detectors Other Fire Detectors Manual Pull Stations Notations Part No.
Qty Protected Elect Length Width Deep Fat Fryer in x in approx. ft x ft x <td>Nozzles Part No. Qty Part No. Use the back of the form, or additional paper, to sketch the piping configuration and device location. TESTING Method system was tested:</td>	Nozzles Part No. Qty Part No. Use the back of the form, or additional paper, to sketch the piping configuration and device location. TESTING Method system was tested:
	restem has been tested and complies with the as Insurance Code, as amended, and the fire and ards. Reproduce Form & Distribute original to Protected Premise Copy 1 to Installing Contractor Copy 2 Authority having Jurisdiction Copy 3 State Fire Marshal's Office